



Medical Affairs

Value & Access

HEOR

Commercial Leaders

Business Development

Generating evidence is half the work. The other half is making sure each audience hears it clearly. Payers need outcomes in their language. KOLs need a narrative they can own. Field teams need a story they can tell. Evidence Communicator bridges that gap with plain-language materials, stress-tested and ready for use.

THE PROBLEM – WHERE THE RESULTS GET STUCK.

Payers Can't Act on It

Statistical outputs don't speak the language of formulary decision-makers.

KOLs Won't Champion It

Without a clinically anchored narrative, KOLs go off-script.

Field Teams Can't Explain It

MSLs default to general messaging when evidence isn't translated for the field.

WHAT YOU RECEIVE – EXPERT TEAM. TAILORED DELIVERABLES.

Each engagement team is assembled specifically for your study and audiences.

DELIVERABLE 1 Evidence Framing Report

INTERNAL FACING

A structured PowerPoint that establishes the strategic foundation for all subsequent work. Synthesizes the evidence landscape, messaging opportunities by audience, core claim priorities, and recommended asset formats. Governs all Phase 2 work.

DELIVERABLE 2 Evidence Brief

EXTERNAL READY

Your primary deployment deck — a polished, audience-ready presentation, built from the Evidence Framing Report. Presents study findings for use with KOL meetings, advisory boards, payer conversations, or Congress.

DELIVERABLE 3 Your Audience-Specific Asset

EXTERNAL READY

One evidence story. One primary audience. One targeted communication tool. The Evidence Framing Report determines which format delivers the most value for your launch. Recommended by us, built together, and ready to advance the conversation.





HOW IT WORKS – THREE PHASES – STRATEGY FIRST, THEN ASSETS

WKS
7 - 11

Phase 1

Discovery & Evidence Framing Report

Synthesis of prior stakeholder interviews, evidence landscape scan, pay coverage review, and audience mapping. Closes with the **Evidence Framing Report** and an audience – specific asset recommendation.

WKS
7 - 11

Phase 2

Evidence Brief & Audience-specific Asset

Both external deliverables with creation guided by the Evidence Framing Report. Shared messaged architecture.

WKS
12-14

Phase 3

Stress-Test & Delivery

Claims verified for scientific accuracy and audience appropriateness. Objections pressure-tested before materials leave the building. Final package includes audience-specific usage guidance.

DELIVERABLE 3– AUDIENCE-SPECIFIC ASSET COMMON OUTPUTS INCLUDE

Payer leave-behind: Formulary decision support (1-12 pages)

MSL FAQ toolkit: Field-ready Q&A for objection handling

Congress/Advisory Board deck: Scientifically rigorous presentation

Publication abstract or whitepaper: Peer-distribution ready

Investor deck module: Evidence summary for fundraising

Other formats: Custom-built based on strategic need



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Founder, MedNavigate

30-year biotech and medtech strategist driving payer coverage, KOL influence, and field impact.

All deliverables include Draft 1 → Draft 2 → Final. | Optional review workshop at each transition.

WHO IS THIS FOR?

Medical Affairs

Directors preparing evidence for KOL engagement and publication strategy

Market Access &

HEOR leaders building payer-facing narratives for coverage decisions

Commercial

leadership translating study findings into field-ready messaging

Business Development & Investor Relations

teams packaging evidence for fundraising, partnership discussions, and valuation support.

HOW TO ENGAGE

TWO WAYS TO BEGIN

Results in Hand — Any Source

Engage directly with results from any analysis project. No prior engagement required. Full scope across all three phases.

STANDALONE

Coming from Evidence Architect: RWD

Clients may continue directly. Phase 1 hours are reduced, given the inherited study context and established stakeholder relationships.

PHASE 4 EXTENSION

Ready to make your evidence work harder?

Contact us at info@mednavigate.com to discuss your study and identify the right evidence communication strategy for your launch.

